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For An Authorized Committee Office Use Only NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Friends of Senator Carl Levin 10 G Street, N.E., Suite 470 ADDRESS (number and street) Check if different than previously Washington DC 20002 reported. (ACC) 2. FEC IDENTIFICATION NUMBER CITY A STATE A ZIP CODE A STATE T DISTRICT C00088484 AMENDED IS THIS NEW Χ OR REPORT (N) (A) M ᅇᅵ 4. TYPE OF REPORT (Choose One) (b) 12-Day PRE-Election Report for the: (a) Quarterly Reports: Runoff (12R) Primary (12P) General (12G) April 15 Quarterly Report (Q1) Convention (12C) Special (12S) July 15 Quarterly Report (Q2) in the October 15 Quarterly Report (Q3) Election on State of January 31 Year-End Report (YE) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) in the Termination Report (TER) Election on State of 2009 09 30 2009 07 0.1 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Tina Stoll Type or Print Name of Treasurer Electronically Filed by Tina Stoll 15 2009 1.0 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office